

Fill in this information to identify the case:

| | | | |
|---|-------------------------------|-------------|----|
| Debtor name | Fitzpatrick Container Company | | |
| United States Bankruptcy Court for the: | Eastern | District of | PA |
| (State) | | | |
| Case number (If known): | 20-14139-pmm | | |

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name

Bank of America

Describe debtor's property that is subject to a lien

Unknown

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

\$ Unknown

\$

Creditor's mailing address

100 North Tryon Street
Charlotte, NC 28255

Describe the lien

Unknown

Creditor's email address, if known

Unknown

Is the creditor an insider or related party?

No
 Yes

Date debt was incurred

Unknown

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor, and its relative priority.

Unknown

As of the petition filing date, the claim is:

Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

First Bank

Describe debtor's property that is subject to a lien

Unknown

\$ Unknown

\$

Creditor's mailing address

10403 West Colfax Ave
Denver, CO 80215

Describe the lien

Unknown

Creditor's email address, if known

Unknown

Is the creditor an insider or related party?

No
 Yes

Date debt was incurred

Unknown

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.

Unknown

As of the petition filing date, the claim is:

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Yes. The relative priority of creditors is specified on lines

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 5,213,858.52

Note: Debtor ceased operations in 2020, its records were incomplete, and most recent available information was a 12/31/19 Trial Balance. See Statement of Limitations.

| Part 1: Additional Page | | Column A Amount of claim * Do not deduct the value of collateral. | Column B Value of collateral that supports this claim |
|---|--|--|---|
| Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. | | | |
| 2.3 | Creditor's name Kampack, Inc. | Describe debtor's property that is subject to a lien Unknown | \$ Unknown |
| Creditor's mailing address 100 Main Street Bristol, PA 19007 | | \$ _____ | |
| Creditor's email address, if known Unknown | | Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes | Describe the lien Unknown |
| Date debt was incurred Unknown | | Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). | |
| Last 4 digits of account number _____ | | As of the petition filing date, the claim is: Check all that apply. | |
| Do multiple creditors have an interest in the same property? | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| <input type="checkbox"/> No | | | |
| <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ | | | |
| <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | | | |
| 2.4 | Creditor's name Shallross Investments, LLC | Describe debtor's property that is subject to a lien Unknown | \$ 763,000 |
| Creditor's mailing address 2655 Philmont Avenue Huntingdon Valley, PA 19006 | | \$ _____ | |
| Creditor's email address, if known Unknown | | Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes | Describe the lien Unknown |
| Date debt was incurred _____ | | Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). | |
| Last 4 digits of account number _____ | | As of the petition filing date, the claim is: Check all that apply. | |
| Do multiple creditors have an interest in the same property? | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| <input type="checkbox"/> No | | | |
| <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ | | | |
| <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | | | |

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
* Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

| | | | | |
|---|--|--|--------------------------------------|---|
| 2.5 | Creditor's name SIG Investments | Describe debtor's property that is subject to a lien Unknown | Amount of claim \$ 25,000 | Value of collateral that supports this claim \$ _____ |
| Creditor's mailing address 2655 Philmont Ave., Suite 206 Huntingdon Valley, PA 19006 | | | | |
| Creditor's email address, if known Unknown | | | | |
| Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Date debt was incurred Unknown | | | | |
| Last 4 digits of account number _____ | | | | |
| Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | | | | |
| Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). | | | | |
| As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| 2.6 | Creditor's name Suburban Leasing Group | Describe debtor's property that is subject to a lien Unknown | Amount of claim \$ Unknown | Value of collateral that supports this claim \$ _____ |
| Creditor's mailing address 2655 Philmont Ave Huntingdon Valley, PA 19006-5314 | | | | |
| Creditor's email address, if known Unknown | | | | |
| Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Date debt was incurred _____ | | | | |
| Last 4 digits of account number _____ | | | | |
| Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | | | | |
| Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). | | | | |
| As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |

Note: Debtor ceased operations in 2020, its records were incomplete, and most recent available information was a 12/31/19 Trial Balance. See Statement of Limitations.

Name

Name _____

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Case number (if known) 20-14139-pmm

20-14139-pmm

47 Desc

Part 1: Additional Page

Column A

Column B
**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

- Do not deduct the value of collateral.

| | |
|---|--|
| <p>2.7 Creditor's name Unknown</p> <p>Creditor's mailing address Unknown</p> <p>Creditor's email address, if known Unknown</p> <p>Date debt was incurred Unknown</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p> | <p>Describe debtor's property that is subject to a lien Unknown \$ 230,000 \$ _____</p> <p>Describe the lien Unknown</p> <p>Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> |
| <p>2.8 Creditor's name Unknown</p> <p>Creditor's mailing address Unknown</p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred Unknown</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. Unknown _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p> | <p>Describe debtor's property that is subject to a lien Unknown \$ 1,730,002.57 \$ _____</p> <p>Describe the lien Unknown</p> <p>Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> |

Note: Debtor ceased operations in 2020, its records were incomplete, and most recent available information was a 12/31/19 Trial Balance. See Statement of Limitations.

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
**Value of collateral
that supports this
claim**

Note: Debtor ceased operations in 2020, its records were incomplete, and most recent available information was a 12/31/19 Trial Balance. See Statement of Limitations.

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.